

# CLAIMS ONLY

Application Number

10541734

Filing Date

Applicant(s)

\* May be used for additional claims or amendments

CLAIMS	AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend
1				
2				
3				
4				
5				
6				
7				
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45				
46				
47				
48				
49				
50				
Total Indep	2			
Total Depend	9			
Total Claims	13			

	Indep	Depend	Indep	Depend	Indep	Depend
51						
52						
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100						
Total Indep						
Total Depend						
Total Claims						